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CONFIRMATION NO. 9389

SERIAL NUMBER 09/724,940	FILING DATE 11/28/2000 RULE	CLASS 424	GROUP ART UNIT 1647	ATTORNEY DOCKET NO. 15270J-004751US
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APPLICANTS

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** CONTINUING DATA *****

09/580015
 This application is a CON of 09/580,105-05/30/2000 PAT 6,399,177
 which is a CIP of 09/322,289 05/28/1999
 which is a CIP of 09/201,430 11/30/1998
 which claims benefit of 60/067,740 12/02/1997
 and claims benefit of 60/080,970 04/07/1998

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 03/28/2001

Foreign Priority claimed

☐ yes ☐ no

35 USC 119 (a-d) conditions met

☐ yes ☐ no ☐ Met after Allowance

Verified and Acknowledged

Examiner's Signature Initials

STATE OR

COUNTRY
CA

SHEETS

DRAWING
18

TOTAL

CLAIMS
30

INDEPENDENT

CLAIMS
2

ADDRESS

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TITLE

Prevention and treatment of amyloidogenic disease

ACTIVE IMMUNIZATION FOR TREATMENT OF ALZHEIMERS DISEASE

FILING FEE

RECEIVED
2982

FEES: Authority has been given in Paper
 No. _____ to charge/credit DEPOSIT ACCOUNT
 No. _____ for following:

☐ All Fees☐ 1.16 Fees (Filing)☐ 1.17 Fees (Processing Ext. of time)☐ 1.18 Fees (Issue)